

SUPPLEMENTAL APPLICATION DATA SHEET**Application Information**

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| Application number:: | <u>10081862</u> |
| Filing Date:: | <u>02/20/02</u> |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested classification:: | |
| Suggested Group Art Unit:: | <u>1741</u> |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | |
| Computer Readable Form (CRF)?:: | No |
| Number of copies of CRF:: | |
| Title :: | UNDER THE COUNTER WATER TREATMENT SYSTEM |
| Attorney Docket Number:: | 430117.413C1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 9 |
| Small Entity?:: | No |
| Petition included?:: | No |
| Petition Type:: | |
| Licensed U.S. Gov't Agency:: | |
| Contract or Grant No:: | |
| Secrecy Order in Parent Appl.?:: | No |

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full-CapacityDeceased
Given Name:: Kit
Middle Name:: G.
Family Name:: Baldwin
Name Suffix::
City of Residence:: West Linn
State or Province of Residence:: OR
Country of Residence:: US
Street of mailing address:: 21880 SW Johnson Rd.
City of mailing address:: West Linn
State or Province of mailing address:: OR
Country of mailing address:: US
Postal or Zip Code of mailing address:: 97068

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full-Capacity
Given Name:: Greg
Middle Name:: K.
Family Name:: Justice
Name Suffix::
City of Residence:: Portland
State or Province of Residence:: OR
Country of Residence:: US
Street of mailing address:: 335 SE 32nd Ave.
City of mailing address:: Portland
State or Province of mailing address:: OR
Country of mailing address:: US
Postal or Zip Code of mailing address:: 97214

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott
Middle Name:: A.
Family Name:: Schorzman
Name Suffix::
City of Residence:: Kenmore
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 18115 62nd Ave. NE
City of mailing address:: Kenmore
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98028

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name:: J.
Family Name:: Orolin
Name Suffix::
City of Residence:: West Linn
State or Province of Residence:: OR
Country of Residence:: US
Street of mailing address:: 20705 SW Willamette Dr.
City of mailing address:: West Linn
State or Province of mailing address:: OR
Country of mailing address:: US
Postal or Zip Code of mailing address:: 97068

Fourth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Troy
Middle Name:: T. C.
Family Name:: Johnson
Name Suffix::
City of Residence:: Portland
State or Province of Residence:: OR
Country of Residence:: US
Street of mailing address:: 111 S.W. Harrison St., Apt. 19B
City of mailing address:: Portland
State or Province of mailing address:: OR
Country of mailing address:: US
Postal or Zip Code of mailing address:: 97201

Fifth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Vaughn
Middle Name:: A.
Family Name:: Sucevich
Name Suffix::
City of Residence:: West Linn
State or Province of Residence:: OR
Country of Residence:: US
Street of mailing address:: 3400 SW Riverknoll Way
City of mailing address:: West Linn
State or Province of mailing address:: OR
Country of mailing address:: US
Postal or Zip Code of mailing address:: 97068

Sixth Applicant Information

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|---|--|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | Full Capacity <u>Deceased</u> |
| Given Name:: | Aaron |
| Middle Name:: | R. |
| Family Name:: | Johnson |
| Name Suffix:: | |
| City of Residence:: | Hillsboro |
| State or Province of Residence:: | OR |
| Country of Residence:: | US |
| Street of mailing address:: | 29628 NW Evergreen Rd. |
| City of mailing address:: | Hillsboro |
| State or Province of mailing address:: | OR |
| Country of mailing address:: | US |
| Postal or Zip Code of mailing address:: | 97124 |

Seventh Applicant Information

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| <u>Applicant Authority Type::</u> | <u>Inventor</u> |
| <u>Primary Citizenship Country::</u> | <u>US</u> |
| <u>Status::</u> | <u>Full Capacity</u> |
| <u>Given Name::</u> | <u>Greg</u> |
| <u>Middle Name::</u> | <u>K.</u> |
| <u>Family Name::</u> | <u>Justice</u> |
| <u>Name Suffix::</u> | |
| <u>City of Residence::</u> | <u>Portland</u> |
| <u>State or Province of Residence::</u> | <u>OR</u> |
| <u>Country of Residence::</u> | <u>US</u> |
| <u>Street of mailing address::</u> | <u>335 SE 32nd Ave.</u> |
| <u>City of mailing address::</u> | <u>Portland</u> |
| <u>State or Province of mailing address::</u> | <u>OR</u> |
| <u>Country of mailing address::</u> | <u>US</u> |
| <u>Postal or Zip Code of mailing address::</u> | <u>97214</u> |

Seventh Applicant Information

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Kit
 Middle Name:: G.
 Family Name:: Baldwin
 Name Suffix::
 City of Residence:: West Linn
 State or Province of Residence:: OR
 Country of Residence:: US
 Street of mailing address:: 21880 SW Johnson Rd.
 City of mailing address:: West Linn
 State or Province of mailing address:: OR
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 97068

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

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| Representative Customer Number:: | | 00500 |
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Domestic Priority Information

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| Application :: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This Application | Continuation-in-Part of | 09/637,955 | 08/11/00 |

Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
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Assignee Information

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|---|---------------------------------------|
| Assignee name:: | H2O Technologies, Ltd. |
| Street of mailing address:: | 4011 S.E. International Way, Ste. 604 |
| City of mailing address:: | Milwaukie |
| State or Province of mailing address:: | OR |
| Country of mailing address:: | US |
| Postal or Zip Code of mailing address:: | 97267 |

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